
Bree Collaborative | Perimenopause and Menopause

August 12th 2026 | 2:30-4PM

Hybrid

MEMBERS PRESENT VIRTUALLY

Nicole Saint Clair, MD, FACOG (chair), Regence
Annelise Gaaserud, MD, Kaiser Permanente
Carolyn Halley, MD, Healthpoint
Asher Strauss, PsyD, Kinwell
Jamie Kowatch, RD, CDCES
Kris Somol, ND, Bastyr University

Denise Rodriguez, Seattle Menopause Doula
Naomi Busch, MD, MSCP, Seattle Menopause
Medicine
Josephine Young, MD, Premera
Amy Laurent, MSPH, Microsoft

STAFF AND MEMBERS OF THE PUBLIC

Beth Bojkov, MPH, RN, Bree Collaborative
Karie Nicholas, MA, GDip, Bree Collaborative
Emily Nudelman, DNP, RN, Bree Collaborative

Orly Steinberg, MD, Regence
Samantha Grono, Washington State Women's
Commission

WELCOME

Nicole reviewed the agenda for the day and asked for a motion to approve the minutes from the previous meeting. There was a correction of the date at the bottom of the minutes. The revised minutes will be posted online.

- Action: Motion to approve revised June minutes
- Outcomes: Revised June minutes approved

EXECUTIVE ORDER 26-01: SAMATHA GRONO

Beth invited Samantha Grono, Government Affairs Specialist from the Washington State Women's Commission to introduce herself and provide an overview of Executive Order 26-01, outlining the state's directive for menopause-related workplace accommodations.

- Executive Order 26-01 affirms that employees experiencing perimenopause or post-menopause symptoms that impact job performance can seek reasonable accommodations under Washington's law against discrimination. The order directs state agencies to review their accommodations policies, identify gaps, and share best practices.
- The Bree is named in the executive order to support the Department of Health and Health Care Authority in developing training materials for employees and employers in drafting resources and guidance for both public and private employers regarding menopause accommodations.
- The Order also calls for reviewing and providing recommendations for professional licensing credits to ensure healthcare providers are well-educated in supporting patients experiencing menopause
- Discussion
 - Are there any potential legislative agenda items coming from the Executive Order?
 - No specific items are planned, but recommendations may be included in the report to the governor's office due next April and feedback from stakeholders is welcomed for future considerations

MENOPAUSE IN THE WORKPLACE: AMY LAURENT, MSPH, MICROSOFT

Beth transitioned the group to invite Amy Laurent, MSPH, forward to provide an overview of Microsoft's approach to supporting employees through the menopause transition.

- **Rationale and Impact:** Overview of menopause's importance in the workplace, highlighted that symptoms often arise at the peak of employees' careers and can affect retention, performance, and equity.
- **Benefit Design and Telehealth:** Microsoft offers clinical and telehealth support for menopause through a third-party provider which provides 24/7 access to OBGYNs and mental health professionals, as well as resources for symptom management, career coaching, and self-advocacy.
- **Workplace Flexibility and Accommodations:** Microsoft provides flexible work schedules, individualized workplace adjustments, and income protection through disability leave programs, with accommodations determined on a case-by-case basis in line with ADA standards.
- **Employee Communities and Feedback Loops:** Microsoft leverages employee resource groups to promote education and stigma-free conversation about menopause and uses employee feedback to improve provider education and benefit design.
- Discussion
 - Does Microsoft track sick leave related to menopause symptoms?
 - Do not track sick leave by reason to protect privacy, and the third party vendor's program is relatively new and building out data on engagement and outcomes

GUIDELINE REVIEW

Beth transitioned the meeting to a brief review of the drafted guidelines for workplace supports. The following was discussed during review of the employer guidelines:

- Menopause is not explicitly listed as a disability under the ADA but symptoms that substantially limit job functions may qualify for protection – the process of requesting an accommodation is guided by ADA standards which are intentionally flexible and individualized
 - Some concern about categorizing menopause as a disability; using the term accommodations provides some legal protection without labeling menopause as a disability
- Several complexities to accommodations were discussed: shift work adjustments and duration of symptoms are examples. Clear, equitable, and reasonable policies that do not inadvertently create discrimination or operational burdens are the goal
- Supervisor and manager training is critical to ensure accommodations are implemented appropriately and to prevent discrimination, with suggestions to integrate menopause-awareness into existing anti-discrimination and annual training programs
- Insurance benefit design
 - Need for transparent coverage of hormone therapy, non-hormonal treatments, behavioral health, and preventive services
 - Ensure EAPs have providers with specialization in menopause, could provide employers a suggested list of questions to vet an EAP
- Importance to track policy implementation, engage employees with lived experience, and ensure accountability mechanisms are in place especially for workplaces without accommodations teams

PUBLIC COMMENT AND GOOD OF THE ORDER

Beth invited final comments or public comments and thanked all for attending. Public comment was provided by Rachelle Hunt and Jen Kiowski, sharing findings of an ethnographic interview study with individuals experiencing perimenopause and menopause in the workplace, noting employees often overcompensate at work to mask symptoms which may obscure the need for support from employers. The workgroup's next meeting will be on **Wednesday, September 9th from 2:30-4PM PST IN PERSON** (virtual option available)